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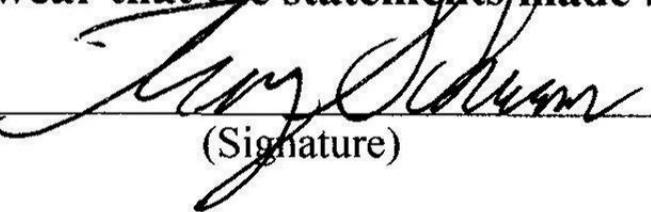
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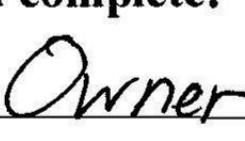
STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE	
The Salem Special		09-30-09	
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE \$ 29.24/30.19/33.00	
Weekly	52		
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)			
P.O. Box 220, Salem, McCook County, South Dakota 57058-0220			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)			
P.O. Box 220, Salem, McCook County, South Dakota 57058-0220			
6. FULL NAME OF PUBLISHER: Troy Schwans			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME		COMPLETE MAILING ADDRESS	
Schwans Publications Inc		PO Box 220, Salem, SD 57058	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)			
Danny Schwans, PO Box 220, Salem, SD 57058			
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)		1650	1650
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.		84	75
2. Mail Subscription (Paid and or requested)		1128	1096
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		1212	1171
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS		97	95
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		1309	1266
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing		341	384
2. Return from News Agents		0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)		1650	1650

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:


 (Signature)


 Owner
 (Title)

State of South Dakota)

Sworn to before me this 30th day of Sept, 2009

County of McCook)


 Tamara E. Paulsen
 Notary Public

(Seal)

TAMARA E. PAULSEN
 NOTARY PUBLIC
 SOUTH DAKOTA

SEAL

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